

FORM 1 GENERAL		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permitting Program <i>(Read the "General Instructions" before starting.)</i>	EPA I.D. NUMBER <div style="border: 1px solid black; padding: 2px; font-family: monospace; font-size: 1.2em;"> GA00428690573 </div>
II. POLLUTANT CHARACTERISTICS INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.		GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	

SPECIFIC QUESTIONS	MARK 'X'	YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	MARK 'X'	YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)			X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)			X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)			X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)			X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)			X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)			X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)			X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)			X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)			X	

III. NAME OF FACILITY	1 SKIP <u>SHERWIN WILLIAMS COMPANY</u>
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IV. FACILITY CONTACT	A. NAME & TITLE (last, first, & title) 2 <u>ERICKSON ROBERT PLANT MANAGER</u>	B. PHONE (area code & no.) <u>404 961 7780</u>
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V. FACILITY MAILING ADDRESS	A. STREET OR P.O. BOX 3 <u>6795 S. MAIN ST.</u> B. CITY OR TOWN 4 <u>MORROW</u> C. STATE <u>GA</u> D. ZIP CODE <u>30260</u>
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VI. FACILITY LOCATION	A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER 5 <u>6795 S. MAIN ST.</u> B. COUNTY NAME <u>CLAYTON</u> C. CITY OR TOWN 6 <u>MORROW</u> D. STATE <u>GA</u> E. ZIP CODE <u>30260</u> F. COUNTY CODE (if known)
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NOT

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
2851 (specify) PAINT MANUFACTURE				7 (specify)			
C. THIRD				D. FOURTH			
7 (specify)				7 (specify)			

VIII. OPERATOR INFORMATION

A. NAME		B. Is the name listed in Item VIII-A also the owner?
SHERWIN WILLIAMS COMPANY		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)		D. PHONE (area code & no.)	
F = FEDERAL S = STATE P = PRIVATE	M = PUBLIC (other than federal or state) O = OTHER (specify) M (specify)	404 961 7780	

E. STREET OR P.O. BOX
6795 S. MAIN ST.

F. CITY OR TOWN	G. STATE	H. ZIP CODE	IX. INDIAN LAND
MORROW	GA	30260	Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)		D. PSD (Air Emissions from Proposed Sources)	
NONE		NONE	
B. UIC (Underground Injection of Fluids)		E. OTHER (specify)	
NONE		NONE (specify)	
C. RCRA (Hazardous Wastes)		E. OTHER (specify)	
GAD042869057		NONE (specify)	

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Sherwin Williams is engaged in the manufacture and distribution of water based and solvent based, interior and exterior, trade sales protective and decorative coatings at this facility.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
WENDELL D. GILLUND SENIOR VICE PRESIDENT	Wendell D. Gillund	11-19-80

COMMENTS FOR OFFICIAL USE ONLY

C. COMMENTS
TOM

EPA Form 3510-3 (6-80)

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "104"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
POUNDS P
TONS T

METRIC UNIT OF MEASURE CODE
KILOGRAMS K
METRIC TONS M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY																		
W G A D 0 4 2 8 6 9 0 5 7 3 1													W DUP 2 DUP																		
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																															
EPA WASTE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEAS- URE (enter code)	1. PROCESS CODES (enter)								2. PROCESS DESCRIPTION (if a code is not entered in D(1))																			
				23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50
1	K078	25	T	S01																									also on P105		
2	K079	1125	T	S02	T01																										
3	K081																													INCLUDED WITH ABOVE	
4	K082	25	T	S01																											
5	F003	ONLY AS NECESSARY	P	S01																											
6	F004	" 100	P	S01																											
7	F005	" 100	P	S01																											
8	P090	" 100	P	S01																											
9	U002	" 100	P	S01																											
10	U031	" 100	P	S01																											
11	U052	" 100	P	S01																											
12	U140	" 100	P	S01																											
13	U147	" 100	P	S01																											
14	U154	" 100	P	S01																											
15	U159	" 100	P	S01																											
16	U161	" 100	P	S01																											
17	U220	" 100	P	S01																											
18	U239	" 100	P	S01																											
19	D001	" 100	P	S01																											
20	D002	" 100	P	S01																											
21	D003	" 100	P	S01																											
22	D000	" 100	P	S01																											
23																															
24																															
25																															
26																															

000003
NOT

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)**E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.**

EPA I.D. NO. (enter from page 1)

S	F	G	A	D	0	4	2	8	6	9	0	5	7	3	6
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V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

3	3	3	4	1	5	N
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LONGITUDE (degrees, minutes, & seconds)

0	8	4	2	0	3	9	W
---	---	---	---	---	---	---	---

VIII. FACILITY OWNER
☐ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

S	F	S	H	E	R	W	I	N	W	I	L	L	I	A	M	S	C	O	M	P	A	N	Y
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

2	1	6	5	6	6	2	0	0	0
---	---	---	---	---	---	---	---	---	---

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

S	F	1	0	1	P	R	O	S	P	E	C	T	A	V	E	.	N	W
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

S	F	C	L	E	V	E	L	A	N	D
---	---	---	---	---	---	---	---	---	---	---

O	H
---	---

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IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

WENDELL D GILLUND
SENIOR VICE PRESIDENT

Wendell D. Gillund

11-19-80

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

R.E. ERICKSON

R.E. ERICKSON
H.B. Williams, Jr.

11-19-80



U.S. ENVIRONMENTAL PROTECTION AGENCY

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

INSTALLATION'S EPA I.D. NO.	GAD042869057
I. NAME OF INSTALLATION	
II. INSTALLATION MAILING ADDRESS	SHERWIN-WILLIAMS CO* 6795 S MAIN ST MORROW, GA 30260
III. LOCATION OF INSTALLATION	6795 S MAIN ST MORROW, GA 30260

000174
45
RECEIVED
EPA/REGION IV

SEP 25 11 29 A

FOR OFFICIAL USE ONLY

COMMENTS

DIVISION

INSTALLATION'S EPA I.D. NUMBER	APPROVED	DATE RECEIVED (yr., mo., & day)
31		000818

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

CITY OR TOWN	ST.	ZIP CODE
4		

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

CITY OR TOWN	ST.	ZIP CODE
6		

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2	ERICKSON	ROBERT	PLANT MANAGER	404	961	7780
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V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8	THE SHERWIN WILLIAMS COMPANY
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B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

F = FEDERAL
M = NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☒ A. GENERATION☐ B. TRANSPORTATION (complete item VII)☒ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR☐ B. RAIL☐ C. HIGHWAY☐ D. WATER☐ E. OTHER (specify):

NOT

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

GAD042869057

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

I.D. - FOR OFFICIAL USE ONLY															
5	W	G	A	D	0	4	2	5	6	9	0	5	7	2	1
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F004 23 - 26	2 F003 23 - 26	3 F005 23 - 26	4 23 - 26	5 23 - 26	6 23 - 26
7 23 - 26	8 23 - 26	9 23 - 26	10 23 - 26	11 23 - 26	12 23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 K079 23 - 26	14 K081 23 - 26	15 K082 23 - 26	16 K078 23 - 26	17 23 - 26	18 23 - 26
19 23 - 26	20 23 - 26	21 23 - 26	22 23 - 26	23 23 - 26	24 23 - 26
25 23 - 26	26 23 - 26	27 23 - 26	28 23 - 26	29 23 - 26	30 23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 P090 23 - 26	32 4002 23 - 26	33 4031 23 - 26	34 4052 23 - 26	35 4140 23 - 26	36 4147 23 - 26
37 4154 23 - 26	38 4159 23 - 26	39 4161 23 - 26	40 4220 23 - 26	41 4239 23 - 26	42 23 - 26
43 23 - 26	44 23 - 26	45 23 - 26	46 23 - 26	47 23 - 26	48 23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49 23 - 26	50 23 - 26	51 23 - 26	52 23 - 26	53 23 - 26	54 23 - 26
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☒ 3. REACTIVE
(D003)

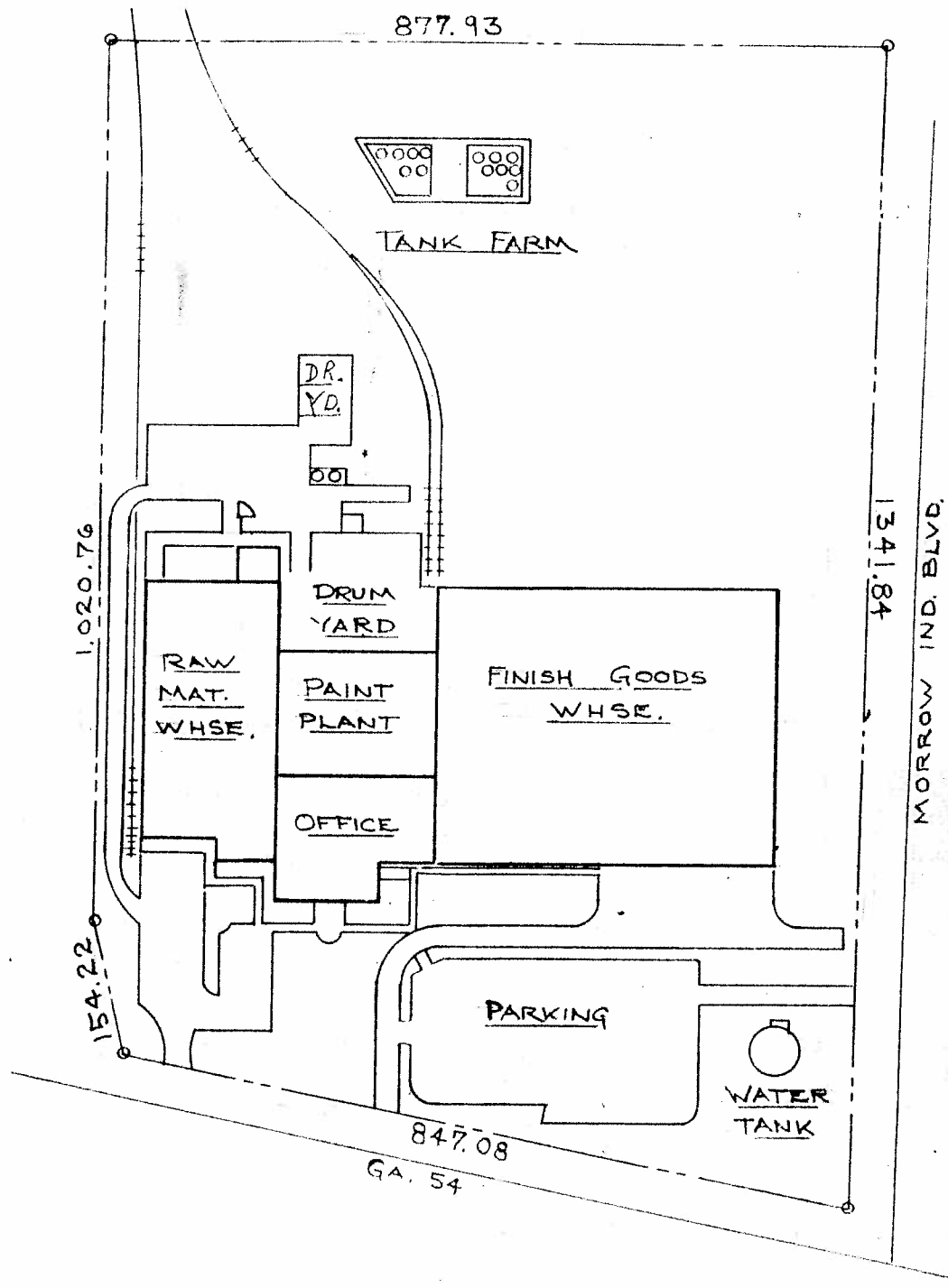
☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE Robert Erickson	NAME & OFFICIAL TITLE (type or print) ROBERT ERICKSON PLANT MANAGER	DATE SIGNED 8/12/80
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V. FACILITY DRAWING (see page 4)



THE SHERWIN WILLIAMS CO.

MORROW, GEORGIA

SCALE 1" = 200'

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NOT

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RCRA MAINTENANCE FORM

ID # CAD042 869057 FACILITY NAME Shewin Williams

F1 Notif. approval _____
 Date notified _____
 Permit app. approved _____
 Date Part A r'cvd _____
 * Facility name 8 _____
 Notif. confidential _____
 Part A confidential _____
 Closure date _____

F2 Contact name & title _____
 Contact telephone # _____
 Modif. under const. _____
 Commercial fac. indic. _____
 Non-reg. fac. indic. _____

F3 Mailing address _____

F4 Mailing city _____ State _____ Zip _____

F5 * Facility address _____
 * County name _____

F6 * Facility city _____ State _____ Zip _____
 * County code _____
 Drawings 8 Photos 8 District code _____
 River basin code _____ Latitude _____ Longitude _____

F7 SIC _____ NEW SIC _____

F8 Facility operator name _____ Owner type _____
 Activity codes: Gen _____ Trans _____ TSD 8 UIC _____
 Transport mode: Air _____ Rail _____ Hwy _____ Water _____ Other _____
 Owner/oper ind. _____ Facility status 8 RCRA permit status _____
 Existence date 8 _____

F9	Type	Permit number	Type	New permit number

(over)
 000005
 JUN 6 1984

* This data can only be entered through the FINDS System. *

NOT

F0 Date acknowledgement sent: Notification _____
Int. status _____ Int. status 2 _____

FA Operator tele. # _____ Street _____

FB City _____ State _____ Zip _____ Indian land _____

FC Comment # _____ Comment _____

FE Facility owner _____ Tele.# _____

FF Owner street _____

FG Owner city _____ State _____ Zip _____

CL	Process code	Amount	Unit	New code	New Amount	New Unit
	<u>502</u>	_____	_____	<u>B</u>	_____	_____
	<u>501</u>	_____	_____	<u>B</u>	_____	_____
	<u>701</u>	_____	_____	<u>B</u>	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____

W1	Waste seq #	Waste Code	Waste Amount	Unit	New Waste	New Amount	New Unit
	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____

W2	Waste Seq #	Waste Code	Process	Change Process
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____



JOE D. TANNER
Commissioner

7
Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

J. LEONARD LEDBETTER
Division Director

November 29, 1982

Mr. R.B. Seagraves
Plant Engineer
Sherwin Willaims
6795 South Main Street
Morrow, GA 30260

RE: Request for Facility Status
Changes for Sherwin Williams,
Morrow, GAD042869057

Dear Mr. Seagraves:

This will acknowledge receipt of your request for withdrawal of your application for a Hazardous Waste Facility permit.

Based on the information provided, withdrawal of your application is warranted and your permit application has been placed in our inactive files. As requested, your status has been changed to a generator and your EPA Identification Number has been retained.

Please be advised that withdrawal of your permit application invalidates any variance that you received to continue existing hazardous waste treatment storage or disposal during the permit review process and that based on our concurrence with your withdrawal request, the Federal Environmental Protection Agency will terminate your facility's interim status.

Should you wish to treat, store, or dispose of hazardous waste in the future, it will be necessary that a hazardous waste handling permit be issued, prior to the construction of such facilities, under authority of Section 8 of the Georgia Hazardous Waste Management Act and paragraphs .10 and .11 of Georgia's Rules for Hazardous Waste Management, Chapter 391-3-11.

If further clarification is needed on this matter, please feel free to contact Ms. Gwendolyn Glass at 404/656-7802.

Sincerely,

John D. Taylor, Jr.
Program Manager
Industrial & Hazardous Waste
Management Program

JDT:ggk:1842C

cc: James H. Scarbrough
Moses N. McCall, III
File: Sherwin Williams (Y)

000006



JOE D. TANNER
Commissioner

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

J. LEONARD LEDBETTER
Division Director

August 12, 1982

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Robert Erickson
Plant Manager
Sherwin-Williams
6795 S. Main Street
Morrow, GA 30260

RE: Sherwin-Williams, 6795 S. Main
St., Morrow, GA 30260, EPA ID
#GAD042869057

Dear Mr. Erickson:

This letter constitutes a formal request for Part B of your application for a hazardous waste facility permit under the Georgia Hazardous Waste Management Act for the above referenced facility. This request is made under the authority of Georgia Rules for Hazardous Waste Management, Chapter 391-3-11-.11(2)(a) and is applicable to the following hazardous waste handling units:

1. Tank Storage Area
2. Drum Storage Area

The State of Georgia received interim authorization for Phase I of the Hazardous Waste Program under RCRA on February 3, 1981. On May 21, 1982 Georgia received Phase II interim authorization (the permitting portion) of the Hazardous Waste Program and is, at this time, proceeding with all applicable portions of Phase I and Phase II.

Enclosed are copies of the State rules which set forth the information required in the Part B application for your facility. Send four copies of the completed Part B application to the Georgia EPD no later than 180 days from the date of this request. The mailing address of EPD is as follows:

Georgia Environmental Protection Division
270 Washington Street, S.W., Room 824
Atlanta, GA 30334
ATTN: Moses N. McCall, III

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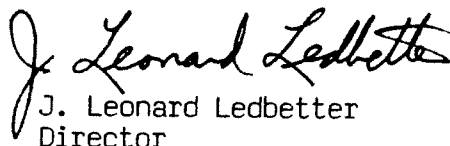
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Mr. Robert Erickson
August 12, 1982
Page Two

Should you claim any information except your name and address to be confidential, you must assert such claim by stamping the words "confidential business information" on each page containing such information. If no claim is made and substantiated at the time of submission, the information may be made available to the public without further notice. If a claim is asserted and substantiated, the information will be treated in accordance with the procedures in Section 20 of the Georgia Hazardous Waste Management Act.

Should you have any questions concerning these requirements, please contact John Taylor of the Georgia EPD 404/656-2833 to discuss the application requirements in more detail.

Sincerely,


J. Leonard Ledbetter
Director

JLL:hbk

Enclosures

cc: James Scarbrough, USEPA
Moses N. McCall, III
File: Sherwin-Williams, Morrow (Y)

000000

NOT

042 869 057



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

GA0042869057

INSTALLATION ADDRESS

SHERWIN-WILLIAMS CO*
6795 S MAIN ST
MORROW

GA 30260

6795 S MAIN ST
MORROW

GA 30260



ACKNOWLEDGEMENT OF NOTIFICATION
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EPA I.D. NUMBER

GAD042869057

INSTALLATION ADDRESS

SHERWIN-WILLIAMS CO*
6795 S MAIN ST
MORROW

GA 30260

6795 S MAIN ST
MORROW

GA 30260

Part A, Permit Process --- Internal Checklist

ID Number GAD042869057 Inst Name SHERWIN-WILLIAMS CO

PHASE ONE

Refer to Form No:	Interim Regulatory Requirements	Indicate by your initials:		Valid Prmlg Date?
		Yes	No	
1	T/S/D Facility? (If No, return to respondent.)	<u>PK</u>	<u> </u>	
3	Form 1 received?	<u>PK</u>	<u> </u>	
1	Form 3 received?	<u>PK</u>	<u> </u>	
1 & 3	Postmarked on or before November 19, 1980?	<u>PK</u>	<u> </u>	
3	Date of operation entered?	<u>PK</u>	<u> </u>	
3	Date of operation on or before November 19, 1980?	<u>PK</u>	<u> </u>	
Notif. record	Notifier?	<u>PK</u>	<u> </u>	
	Notified on or before August 18, 1980?	<u>PK</u>	<u> </u>	
1	Form 1, XIII B signed?	<u>PK</u>	<u> </u>	
3	Form 3, IX B Signed?	<u>PK</u>	<u> </u>	

(If all ten items above are initialed in the Yes column, generate Interim Status Acknowledgement and indicate the trigger date here:

12/19/80

PHASE TWO

1	Unsure if regulated or non-regulated?	<u> </u>	<u>PK</u>
3	New facility?	<u> </u>	<u>PK</u>
1 & 3	Core items missing? If Yes, indicate which items: Facility name____; location____; mail address____; operator info____; certification____; process info____; waste info____; owner____; sigs____.		

PHASE THREE

1 & 3 Non-core items missing? If Yes, indicate which items:
Maps____; photos____; drawings____; lat/long____.
Other observations and comments:

Log out/Log in
on reverse side.

Received Date Stamp
000001
NOT
GA 042 869 057
(Stamp forms also)

Georgia Department of Natural Resources

205 Butler Street, S.E., Floyd Towers East, Atlanta, Georgia 30334

Joe D. Tanner, Commissioner

Harold F. Reheis, Director

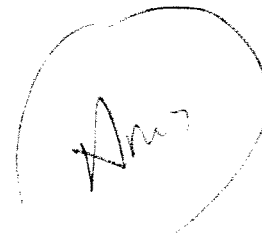
Environmental Protection Division

REPLY TO:

HAZARDOUS WASTE MANAGEMENT BRANCH
GENERATOR COMPLIANCE PROGRAM
4244 INTERNATIONAL PARKWAY
SUITE 104
ATLANTA, GEORGIA 30354
(404)362-2684

GAD042869057
NOV
09-21-93
COR

September 21, 1993



Mr. John Baker
The Sherwin-Williams Company
6795 South Main Street
Morrow, Georgia 30260

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

SUBJECT: NOTICE OF VIOLATION
The Sherwin-Williams Company
Morrow, Clayton County
EPA ID Number GAD042869057
HWMB Complaint Record #042-93

Dear Mr. Baker:

Hazardous waste generators in Georgia are required to comply with Georgia's Hazardous Waste Management Act (O.C.G.A. 12-8-60 et. seq.), the Georgia Rules for Hazardous Waste Management, Chapter 391-3-11 ("Rules"), and the Federal regulations adopted by reference. On June 29, 1993, John Williams of the Generator Compliance Program conducted a compliance evaluation inspection of the facility noted above. Certain violations of the Rules, Chapter 391-3-11-.08 and Title 40 of the Code of Federal Regulations, Part 262, did exist.

The following violations cited by the Code of Federal Regulations were observed during the subject inspection:

40 CFR Section 262.34(a)(1)(i) Accumulation time - because the facility did not have four 55-gallon drums of paint waste closed, as required by Section 265.173(a), "Management of Containers";

40 CFR Section 262.34(a)(1)(ii) Accumulation time - because the facility did not record the release of precipitation from the secondary containment around the spent solvent tank, as required by Section 265.195(c), "Inspections"; and

40 CFR Section 262.34(a)(3) Accumulation time - because the facility did not label four 55-gallon drums of paint waste on the first floor of the process building near the solvent recovery pump with the words "Hazardous Waste".

TRIP REPORT

Sherwin-Williams Company

September 21, 1993

Page 2

The above cited violations must be corrected immediately. A written response documenting how these violations have been corrected must be submitted no later than October 25, 1993. Included in this response should be any documentation which shows correction of these violations and compliance with the rules and regulations. For your information, enclosed are the generator inspection checklist and the tank system checklist completed during the inspection.

Please direct any inquiries and correspondence on this subject to John Williams of my technical staff.

Sincerely,



Freddie L. Dunn, Jr.

Program Manager

Hazardous Waste Compliance Unit

FLD:JAW:klc

Enclosures (2)

c: Renée Hudson Goodley

File: The Sherwin-Williams Company, Morrow

FAGCP\DOCS\JW\SHERWIN.NOV

Georgia Department of Natural Resources

205 Butler Street, S.E., Suite 1066, Atlanta, Georgia 30334

Lonice C. Barrett, Commissioner

Environmental Protection Division

Harold F. Reheis, Director

404/657-8831

September 8, 2000

Mr. John Baker
Analyst
The Sherwin-Williams Co.
6795 South Main St.
Morrow, Georgia 30260

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

SUBJECT: **NOTICE OF VIOLATION**
PBT Large Quantity Generator Requirements
The Sherwin-Williams Co.
Morrow, Clayton County
EPA I.D. Number GAD042869057

Dear Mr. Baker:

On June 20, 2000, John Short of the Generator Compliance Program conducted a compliance evaluation inspection of the referenced facility. This inspection included an overview of your efforts to reduce hazardous waste, including waste streams with persistent, bioaccumulative and toxic (PBT) constituents, in accordance with your Hazardous Waste Reduction Plan. The reduction of waste streams containing PBT constituents is a national goal. Thank you for your efforts.

Hazardous waste generators in Georgia are required to comply with Georgia's Hazardous Waste Management Act (O.C.G.A. 12-8-60 et. seq.), the Georgia Rules of Hazardous Waste Management (Chapter 391-3-11), and the Federal regulations adopted by reference. The following violation of the Rules, Section 391-3-11-.08 and Section 391-3-11-.16, and the regulations, Title 40 of the Code of Federal Regulations, Part 262 was observed during the inspection:

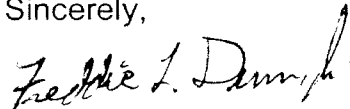
40 CFR Section 262.34(c)(1)(ii) Accumulation Time - because the owner/operator failed to mark a satellite container of disposable rags with the words "hazardous waste" or with other words that identify the contents;

NOTICE OF VIOLATION
THE SHERWIN-WILLIAMS CO.
SEPTEMBER 8, 2000
PAGE 2

Thank you for the prompt response during the inspection to correct this violation. According to your correspondence received July 28, 2000, chromium (hazardous waste code D007) is below detection limit in the waste paint solvent/off-spec paint; therefore, your facility is no longer a PBT waste generator. Enclosed is an 8700-12 Notification Form that can be completed to update the waste codes generated at your facility.

Please direct inquiries and correspondence on this subject to John Short. Also enclosed is a copy of the Generator Inspection Report and the Tank Systems Checklist used during the subject inspection. We appreciate your cooperation in this matter.

Sincerely,



Freddie L. Dunn, Jr.
Unit Coordinator
Hazardous Waste Compliance Unit

FLD/JES/js

Enclosures (3): 8700-12 Notification Form
Generator Inspection Report
Tank Systems Checklist

c: Renée Hudson Goodley

Jeffrey T. Pallas, EPA

File: The Sherwin-Williams Co., Morrow

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